



**City Summary Crash Report**

**1/1/2014 to 12/31/2014**

City : Potomac | \*See Notes at End of Report.

Potomac	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
<b>WEATHER CONDITION</b>											
Clear	2	0	1	1	4	0	3	0	1	2	4
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>
<b>TYPE OF CRASH</b>											
Angle	1	0	0	1	2	0	0	0	0	0	3
Turning	1	0	1	0	2	0	3	0	1	2	1
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>



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<b>CLASS OF CITY</b>												
0 TO 2,500	2	0	1	1	4	0	3	0	1	2	4	
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>	
<b>ROAD SURFACE CONDITION</b>												
Dry	2	0	1	1	4	0	3	0	1	2	4	
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>	



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		Fatal	Injury	Property Damage	Killed		Injured	A	B	C	O	
<b>CLASS OF TRAFFICWAY</b>												
State Numbered Rural		2	0	1	1	4	0	3	0	1	2	4
<b>TOTALS</b>		<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>
<b>DAY OF WEEK</b>												
Wednesday		1	0	0	1	2	0	0	0	0	0	3
Saturday		1	0	1	0	2	0	3	0	1	2	1
<b>TOTALS</b>		<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>



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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
<b>TIME OF DAY</b>											
1 PM	1	0	1	0	2	0	3	0	1	2	1
5 PM	1	0	0	1	2	0	0	0	0	0	3
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>



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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
<b>LIGHT CONDITION</b>											
Daylight	2	0	1	1	4	0	3	0	1	2	4
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>
<b>ROAD DEFECTS</b>											
No Defects	2	0	1	1	4	0	3	0	1	2	4
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>



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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
<b>TRAFFIC CONTROL</b>											
No Controls	1	0	1	0	2	0	3	0	1	2	1
Stop Sign/Flasher	1	0	0	1	2	0	0	0	0	0	3
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>
<b>ROADWAY FEATURE</b>											
Not Applicable	2	0	1	1	4	0	3	0	1	2	4
<b>TOTALS</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>



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Potomac	Number Of Persons						Injury Severity				
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
<b>DRIVER CONDITION</b>											
Normal	4	0	2	2	4	0	1	0	0	1	3
<b>TOTALS</b>	<b>4</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>



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Potomac		Number Of Persons						Injury Severity				
		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
<b>DRIVER AGE/GENDER</b>												
17												
	Male	2	0	1	1	2	0	0	0	0	0	2
21												
	Male	1	0	0	1	1	0	0	0	0	0	1
40-44												
	Female	1	0	1	0	1	0	1	0	0	1	0
<b>TOTALS</b>		<b>4</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>



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Potomac	Total	Number Of Persons				Total Vehicles	Total Killed	Total Injured	Injury Severity			
		Fatal	Injury	Property Damage	A				B	C	O	
<b>PASSENGER AGE/GENDER</b>												
15												
Male	1	0	0	1	1	0	0	0	0	0	0	1
60-64												
Female	1	0	1	0	1	0	1	0	0	1	0	0
Male	1	0	1	0	1	0	1	0	1	0	0	0
<b>TOTALS</b>	<b>3</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>



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	Number Of Persons				Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity			
	Total	Fatal	Injury						A	B	C	O

**PEDALCYCLIST AGE/GENDER**

Potomac	Number Of Vehicles				Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity			
	Total	Fatal	Injury						A	B	C	O

**VEHICLE DEFECTS**

None	4	0	2	2	4	0	3	0	1	2	4
<b>TOTALS</b>	<b>4</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>

**VEHICLE TYPE**

Passenger	2	0	1	1	2	0	3	0	1	2	1
Pickup	2	0	1	1	2	0	0	0	0	0	3
<b>TOTALS</b>	<b>4</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>4</b>

**Notes**

Calendar data selections include data based on the date of the crash. Year selections include data based on the Statistical year in which the crash was processed